

# Communicable Diseases Response Procedure

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**Office of the Chief Risk Officer**  
Health, Safety and Environmental Management  
Emergency Management  
uOttawa.ca



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**Version Control Table**

Version Number	Owner	Approver	Change Summary	Status
Previous versions of this plan were specific management plans (i.e., Covid-19 and H1N1)				
1	OCRO-HSE	OCRO	Initial	Final

## 1. Purpose and Scope

This document supplements the Occupational Health and Safety Management System manuals and procedures, providing a framework for communicable disease management. It supports the safety of the University community while minimizing operational disruptions. Adaptations may be required to meet specific circumstances.

This document serves as an annex to the All-Hazards Response Plan (AHERP) and outlines:

- Response roles and responsibilities
- Internal reporting and notification requirements
- Risk monitoring and incident investigations
- Coordination with Ottawa Public Health (OPH)
- Triggers for emergency operations and response activation
- Continuity of operation and campus reintegration

**Applicability:** All uOttawa campuses, leased locations, faculty, staff, students, visitors and those working remotely or travelling under the auspices of the University of Ottawa.

## 2. Terms and Definitions

Refer to the [HSE Glossary](#) for standard terms. Additional key definitions:

**Communicable disease:** a disease specified under the [Health Protection and Promotion Act](#).

**Infection prevention and control (IPAC):** refers to the practices and procedures which, when consistently applied, can prevent or reduce the risk of transmission of a communicable disease.

## 3. Responsibilities

The management of communicable diseases is responsibility shared by all parties. The Office of the Chief Risk Officer (OCRO), via Health, Safety and Environment (HSE), provides oversight and supports operational responsibilities across key University units. Where the situation warrants, the Emergency Operations Centre (EOC) will be activated and assume oversight and coordination.

The Communicable Disease Response Protocol is outlined in [Appendix 1](#).

The responsibilities of supervisors and workers are detailed in the [health and safety program manuals](#) and [Administrative Procedure 14-1](#). Additional unit responsibilities are described herein.

### University oversight and coordination

#### Health, Safety and Environment (HSE)

- Coordinates with OPH and applicable regulatory bodies
- Monitors emerging public health trends

- Supports units in their response efforts
- Engages the joint health and safety committees (JHSC), as required

### **Incident Response Team (IRT) – Infection Containment Group**

The IRT is a tactical team responsible for implementing a public health response in collaboration with Ottawa Public Health and other regulatory authorities, as required. The IRT monitors, communicates and supports University-wide responses to communicable diseases and related concerns. Members include:

- Health, Safety, and Environment (OCRO)
- Disability Management and Wellness (HR)
- Student Health and Wellness (Student Affairs)
- EOC director and support staff (monitoring)

### **Emergency Operations Centre (EOC)**

The EOC is activated during significant outbreaks and at the discretion of the EOC director.

- Coordinates outbreak response and emergency management activities
- Provides direction and support on any communications required
- Notifies and advises the Crisis Management Team (CMT)
- Shares awareness of the ongoing situation with internal governance, University community and partners
- Implements public health guidance and assesses effectiveness
- Mobilizes additional resources

### **Ottawa Public Health (OPH)**

- Receives and investigates reports of communicable diseases and outbreaks.
- Provides public health direction, guidance and recommendations to the University
- Supports the University's communicable disease response plan by providing expert feedback

## **Key unit responsibilities**

### **Facilities**

- Adjusts cleaning and sanitizing protocols, as required
- Maintains, monitors and adapts building systems (ventilation, water, life safety, access control, etc.)
- Coordinates building closures in collaboration with Protection Services, the unit head(s), HSE and other interested parties

### **Human Resources and Faculty Relations**

- Communicates workplace measures and updates workers, managers and unions, as required
- Supports workplace accommodations
- Supports international workers navigating immigration, immunization and travel issues

- Assists in public health reporting and investigations (e.g., HSE, OPH, WSIB, MLITSD), including supporting OPH in their contact tracing and source identification activities

#### **Student Health and Wellness Centre**

- Provides health information to students
- Assists in public health reporting and investigations (e.g., HSE, OPH, WSIB, MLITSD), including supporting OPH in their contact tracing and source identification activities

#### **Student Affairs (e.g., Registrar, Housing, Sports, Food, Conventions and Reservations)**

- Communicates institutional measures and updates to students, as necessary
- Maintains contingencies for enhanced infection mitigation and control in high-risk environments (e.g., residences, athletics, dining halls and campus food outlets)
- Manages service-level adjustments with vendors (e.g., provision of food during isolation)
- Supports student accommodations and dispute resolution processes
- Assists in public health reporting and investigations (e.g., HSE, OPH, WSIB, MLITSD), including supporting OPH in their contact tracing and source identification activities
- Adjusts exam and class schedules, room assignments and course offerings, as necessary

#### **Student Enrolment Management**

- Monitors travel advisories and coordinates responses with the OCRO, HR, Student Affairs, and Faculties in accordance with [Policy 128 – International Travel Safety](#)
- Develops quarantine and student recall contingencies
- Supports international students in navigating immigration, immunization, and travel issues

#### **Office of Communications, Public Affairs and Government Relations**

- Manages legacy and social media, and public relations
- Implements communications strategies for operational changes
- Coordinates institutional messaging with key units, as required

#### **All University units**

- Implement temporary adjustments to operations (which may include partial closure of work areas, remote work, reduced workforce, etc.) to support the management of communicable disease cases, clusters and outbreaks
- Communicate with and update employees on mitigation measures and the temporary reduction, modification and resumption of activities.
- Develop contingencies for on-campus reduction of the workforce, remote work, family-related accommodations and reintegration
- Maintain lists of:
  - Personnel required on campus for life safety activities
  - Personnel required on campus for critical research, academic and support activities
  - Individuals whose duties can be partially or fully achieved off campus (i.e., work from

home, as authorized by their supervisor)

- Report suspected or actual communicable disease cases and clusters, or other concerning situations to HR, HSE, and/or Student Affairs, as applicable
- Follow direction of University authorities (e.g., EOC, Health and Safety, Disability Management and Wellness, etc.)
- Provide information and other types of support required for response and mitigation activities (e.g., HSE, OPH, WSIB, MLITSD, etc.)
- Implement contingencies in a coordinated and efficient manner
- Support investigations and contingency measures

#### **Joint Health and Safety Committee (JHSC)**

- Identify hazards and recommend improvements
- Review University health or safety practices
- Participate in investigations of incidents and work refusals

### **Preparation**

Preparation enables units to respond effectively to an incident: units must be able to act quickly, which may require suspending certain activities, shifting to remote operations, maintaining minimal service levels or focusing on critical functions. Units are encouraged to contact the [Continuity Management Specialist](#) for additional guidance.

#### **Strategies to increase unit resilience**

##### **Eliminate single points of failure**

- Cross-train staff
- Ensure access to critical information and systems
- Explore temporary centralization of functions with other faculties/services

##### **Enhance supply chain resilience**

- Increase stockpiles, especially of critical equipment and materials
- Contract with multiple suppliers
- Diversify sourcing across different regions, suppliers, etc.

##### **Strengthen leadership and staffing**

- Establish a clear line of succession and delegation of authority
- Identify additional temporary or replacement personnel to maintain operations and manage emergency response workloads

##### **Optimize workspace for infection control**

- Enable remote work where feasible to reduce on-site density
- Implement measures to enforce physical distancing when in-person work is required

- Install protective barriers and provide PPE in high-contact areas based on public health guidance

### Reference documents

- [Occupational Health and Safety Act](#)
- [Health Protection and Promotion Act](#)
- [General OHS Program Manual](#)
- [All Hazards Emergency Response Plan](#)

## 4. Response Actions

### Procedural steps

The following procedural steps **must be followed** when managing communicable diseases:

1. Reporting, advisory and assessment actions
2. Containment and response actions
3. Recovery and resumption actions
4. Incident investigation actions

Additional steps may be required based on the communicable disease in question.

Communicable diseases are illnesses caused by infectious agents that can be transmitted from one person to another. Under the *Health Protection and Promotion Act* (HPPA), certain communicable diseases are designated as reportable to ensure timely intervention to protect the health of the broader community. Certain examples include (but are not limited to) tuberculosis, hepatitis, mpox, measles, etc. The list of designated diseases is available from [Ottawa Public Health](#).

### STEP 1 Reporting, advisory, and assessment actions

Timely and well-coordinated response actions are essential to minimize the spread of communicable diseases. The following points outline the approach to reporting, containment, recovery, investigation, and confidentiality required to ensure a coordinated and efficient response that prioritizes health, safety and operational resilience.

#### Key activities

- Cases should be immediately reported to University authorities (e.g., HR Disability Management and Wellness, HSE or Student Affairs, as applicable)
- Key details to include:
  - **Demographic details** (name, University email address)
  - **Clinical details** (symptoms, onset date)
  - **Potential exposures** (campus areas recently visited, prolonged or close contacts)
- If OPH is not already aware, HSE contacts OPH
- Activate the EOC in case of an outbreak or in cases of high-transmission risk

### If a communicable disease is suspected or confirmed:

- The affected individual(s) must notify the following parties who will support them during the process:
  - Employees must notify their direct supervisor of their absence
  - Student residents must notify their Community Advisor or residence personnel. Students who require academic accommodations should contact their Faculty and, if further support is needed, the Student Health and Wellness team
  - Athletes should notify their coaching staff
- The affected individual(s) or the supervisor should follow the process outlined in Appendix 1 and the [Incident Management Procedure](#)
- HSE collaborates with the respective University parties and liaises with Ottawa Public Health

## STEP 2 Containment and response actions

### Key activities

- Minimize potential transmission
- Encourage individuals to seek medical advice and attention, as required
- Support OPH in their contact tracing and source identification (Infection Containment IRT as directed and required)
- Implement infection control measures (e.g., enhanced sanitation, workspace modifications, PPE, etc.)
- Communicate public health guidance to the necessary audiences

### Context

To effectively and efficiently manage communicable diseases:

1. **Minimize potential transmission:** This may include isolating individuals who are suspected of having, or confirmed as having, a communicable disease until OPH issues further instructions.
2. **Seek medical attention:** Ensure prompt medical care is provided or facilitated, whether through direct assistance, remote consultation, or by calling 911 or Protection Services to facilitate paramedic response.
3. **Support contact tracing and source identification:** Support the contract tracing and source identification efforts, as directed, to identify potential exposures and to prevent further transmission. **University personnel do not conduct contact tracing to maintain confidentiality and privacy.** The University and relevant units will support Ottawa Public Health in this process and help to facilitate OPH efforts to notify individuals of low/high risk exposures.
  - a. The University will prepare lists of affected areas (e.g., offices, classrooms, residences, athletic activities, cafeterias, public spaces, etc.) and individuals (e.g., co-workers, classmates, roommates, etc.) including the name and contact information of those who may have been in close contact. Submit the list to [HSE](#), who will submit it to OPH. OPH may request additional information, including but not limited to a person's date of birth and class schedule.

4. **Implement control measures:** Implement mitigation and control measures, such as enhanced cleaning sanitation, use of personal protective equipment (PPE), restricted access to certain areas, and other infection prevention and control (IPAC) measures as may be required and directed.
5. **Follow advice:** Comply with directives from OPH, University authorities, health-care professionals, etc.

### STEP 3 Recovery and resumption actions

#### Key activities

- Assess and adjust mitigation and control measures, as needed
- Maintain communication with HSE
- Reintegrate individuals with proper medical clearance and safety protocols, as required

#### Context

##### Review control measures

Units must regularly assess the effectiveness of control measures (e.g., cleaning and disinfection protocols, isolation procedures, PPE use, etc.). Adjustments may be required based on new cases or updated public health direction and guidance. Operational changes will be planned and communicated to minimize disruption.

##### Follow advice

The unit head will maintain communication with HSE throughout the recovery phase. HSE, in collaboration with OPH, will provide ongoing guidance to ensure campus health and safety.

##### Return to campus and resumption of activities

Once the circumstances and/or area are deemed safe by University and public health authorities, individuals may gradually return to their regular activities with any required safety protocols in place. Medical documentation (e.g., a medical note), may be required.

### STEP 4 Incident investigation actions

#### Key activities

- Determine root causes and campus-related factors
- Identify program gaps and recommend improvements

#### Context

While not all communicable diseases will originate on campus, investigating those that do is essential and required under provincial health and safety legislation. Thorough investigations help determine the source, the mode of transmission and contributing factors. The investigative findings should support targeted improvements in prevention efforts. Workplace transmission claims will follow established occupational illness processes as outlined in WSIB, MLITSD, and JHSC documents, as required by law. The Infection Containment IRT will initiate and support the investigation. Refer to the [Incident Management Procedure](#) for additional information.

## Program improvement

The investigation will seek to identify gaps in infection prevention and control. This includes evaluating policies, procedures and practices. Stakeholder feedback from health-care professionals, University authorities and JHSCs will inform any changes and strengthen the overall effectiveness of the program.

## Communication

Clear and timely communication will be required to keep the University community informed while balancing and respecting confidentiality and privacy. The decision to communicate widely will be situational, and will depend on guidance from OPH.

The Office of Communications and Public Affairs will manage institutional messaging while unit-specific updates (as needed) will be handled by the unit. All communications will be developed in collaboration with the IRT, HSE, the Office of Communications and Public Affairs and other units involved.

## Confidentiality and privacy

### Key activities

- Protect personal health information acquired during response and mitigation activities
- Limit information disclosure to authorized personnel (e.g., OPH, HSE, other University authorities identified in this document)
- Handle access to information requests according to established procedures

### Context

While managing communicable diseases, [Policy 90 Access to Information and Protection of Privacy](#) and [Procedure 20-13 – Notice of Collection of Personal Information](#) governs management of personal information<sup>1</sup>. The following measures apply:

- University personnel (including academic, research and support staff) must make every effort not to disclose medical information that students or employees disclose except to authorized officials, which may include HR – Disability Management and Wellness; Health, Safety and Environment; the Student Health and Wellness Centre; or Ottawa Public Health.
- When required by public health directives, an order from the Chief Medical Officer of Health, or to respond to known cases on campus, the University will provide necessary information to Ottawa Public Health. This may include:
  - Type of individual (student, resident, athlete, employee, and their contact information, such as email address, phone number, place(s) of address, etc.)
  - Affected unit(s)
  - Relevant dates (symptom onset, positive results, isolation period) and campus locations while infectious

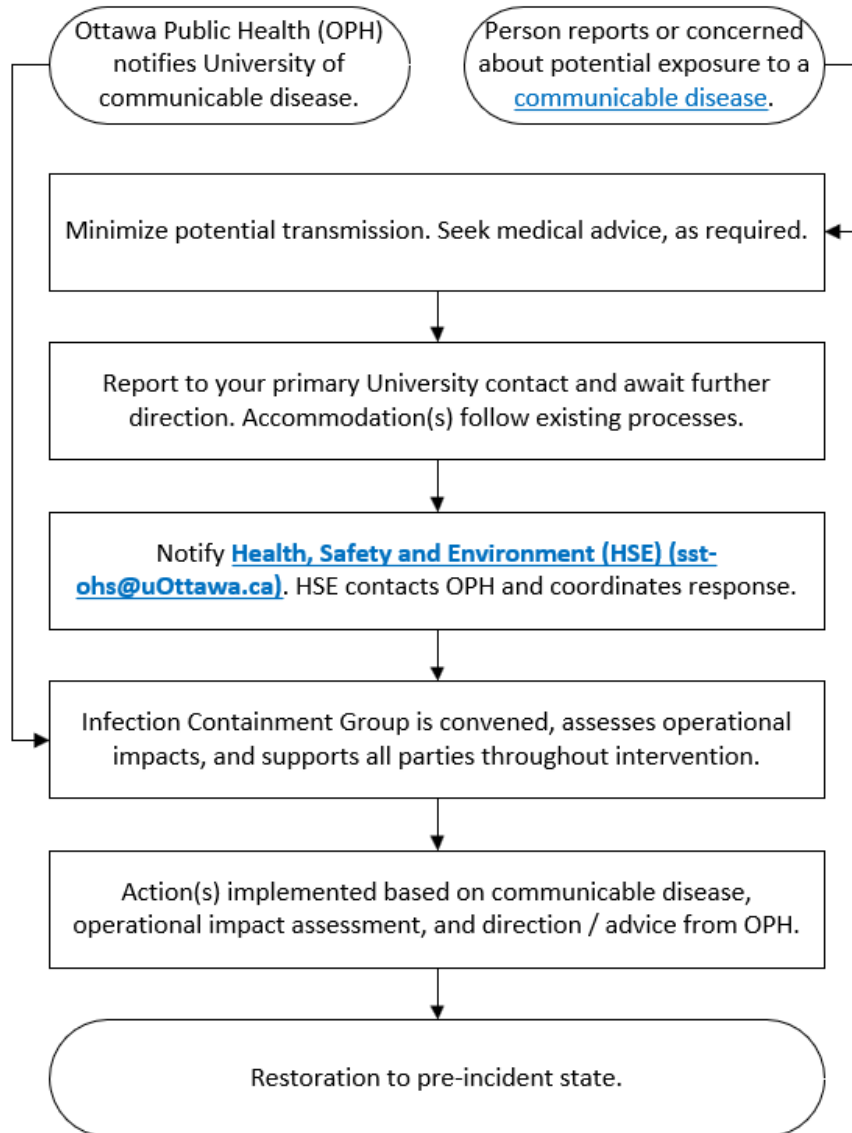
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<sup>1</sup> Means recorded information about an identifiable individual, including the individual's address, sex, age, education, medical or employment history, and other information about the individual under the University's custody or control as provided in Ontario's Freedom of Information and Protection of Privacy Act ("FIPPA").

- Names and contact information of persons identified as potential close contacts (e.g., a list of students in a particular class, a list of employees working in a particular building, etc.)
- Units working with HSE and OPH must cooperate and provide the details necessary for investigation and to protect public health

## Appendix 1 – Communicable Disease Reporting Protocol

Flowchart of the Communicable Disease Reporting Protocol.



## Appendix 2 – Contact Information

### Office of the Chief Risk Officer

Health, Safety and Environmental Management  
[sst-ohs@uOttawa.ca](mailto:sst-ohs@uOttawa.ca)

After hours, weekends and statutory holidays:  
Protection Services  
613-562-5411

### Student Health and Wellness Centre

613-562-5498  
[Online appointment booking](#)  
[healthpromo@uOttawa.ca](mailto:healthpromo@uOttawa.ca)

### Human Resources – Disability Management and Wellness

[santerh@uOttawa.ca](mailto:santerh@uOttawa.ca)

### Ottawa Public Health

Infectious Disease Program

613-580-2424, extension 24224 and leave a detailed, confidential message including your contact information. **After hours, on weekends, or holidays:** call 3-1-1 and ask to speak to Public Health on call.

### Other Resources:

- Ottawa Public Health: [Communicable diseases and reportable conditions](#)
- Ontario Ministry of Health: [COVID-19 Self-Assessment](#)
- Public Health Agency of Canada: [Pathogen Safety Data Sheets and Risk Assessments](#)

## Appendix 3 – Preventing Communicable Diseases

Preventing communicable diseases can be achieved through simple yet effective strategies.

- **Vaccinations:** Encourage up-to-date immunizations. This may include vaccines for influenza, measles, mumps, rubella, and other preventable diseases.
- **Hand hygiene:** Promote frequent handwashing with soap and water for at least 20 seconds. Hand sanitizers with at least 60% alcohol can be used when soap and water are not available.
- **Respiratory etiquette:** Encourage covering mouth and nose with a tissue or crux of the elbow when coughing or sneezing. Dispose of tissues properly and wash hands immediately.
- **Cleaning and disinfection:** Regularly clean and disinfect high-touch surfaces such as doorknobs, light switches and computer keyboards. Use appropriate disinfectants.
- **Air quality:** Improve indoor ventilation and filtration.
- **Stay home when sick:** Encourage individuals to stay home if they are feeling unwell or showing symptoms of a communicable disease. While specific to COVID-19, the [provincial self-screening tool](#) can be applied to several respiratory illnesses.
- **Education and awareness:** Provide information and training on the importance of disease prevention measures. Public Services Health and Safety Association offer a [free IPAC workshop](#).

Further IPAC measures (for example, for COVID-19 and highly transmissible respiratory illnesses) may include:

- **Personal and community protection**
  - Mandate or encourage vaccines in accordance with public health guidelines
  - Mandate or encourage physical distancing and masking indoors (or other PPE depending on the nature of the activity)
  - Require or encourage daily self-assessments before coming to campus
  - Increase the availability of hand sanitizer and masks, and encourage their use
  - Encourage individuals to take any additional action necessary to protect themselves
  - Advise individuals who are confirmed to have, or are suspected of having, a communicable disease to avoid contact with others and to seek necessary medical attention
  - Support the international student community in navigating immigration and travel issues
- **Space management**
  - Temporarily close for sanitization locations in which exposure is confirmed or suspected
  - Implement occupancy limits for campus spaces
  - Establish foot traffic control in buildings
  - Add barriers to public service delivery locations
  - Implement enhanced cleaning protocols, particularly for high-touch surfaces and high-traffic areas
  - Enhance ventilation and air filtration using HEPA filters
  - Display handwashing and respiratory etiquette posters in bathrooms and eating areas

- **Residence management**
  - Tighten access control, including prohibiting visitors
  - Implement case reporting and isolation protocols
  - Provide essential services:
    - Health check-ins
    - Temporary room allocation for isolation
    - Additional cleaning and garbage disposal
    - Provision of food
- **Reduction of on-campus activities**
  - Reduce or suspend noncritical deliveries
  - Reduce or suspend in-person dining at the cafeteria (and other eat-in establishments) and arrange for meal pick-ups or delivery
  - Reduce or suspend on- and off-campus events, including the rental of uOttawa facilities
  - Reduce or suspend all noncritical construction projects and assets maintenance
  - Limit access to campuses and buildings, including authorization letters for required attendance
  - Suspend sports and the use of athletic facilities
  - Limit non-essential in-person research and service delivery
  - Revert to online formats for all possible activities
  - Implement curbside pick-up processes for equipment
- **Reduction of on-campus presence**
  - Prohibit the use of congregation areas in residences
  - Require residents who can return home to do so
  - Direct noncritical staff to work from home
  - Direct critical staff to continue critical work with appropriate protection measures
- **Administrative and communication**
  - Provide an online information hub with links in a banner on all gateway pages and SecurUO and wellness apps
  - Conduct a public information campaign
  - Mobilize a Student Community Health Ambassadors Program
  - Monitor traditional and social media
- **Testing and vaccination clinics**
  - Establish on-campus clinics as required
  - Coordinate with OPH for testing and immunization campaigns